

STATE OF CONNECTICUT
DEPARTMENT OF CONSUMER PROTECTION
 FOOD & STANDARDS DIVISION
 Telephone: (860) 713-6160 Internet: www.ct.gov/dcp



For Official Use Only

APPLICATION FOR LICENSE

INSTRUCTIONS:

All spaces must be completed - please print or type. This application **must be accompanied by a check or money order for the appropriate fee as listed below**, made payable to: "Treasurer, State of Connecticut". **Application fees are non-refundable.**

→ Return your completed application and fee to:

Department of Consumer Protection, License Services Division, 165 Capitol Avenue, Hartford, CT 06106.

I am applying for:

☐ **Bakery License**
Fee: (Based on *Number of Production Workers)

1 - 4 = \$ 10.00

5 - 9 = \$ 20.00

10 - 24 = \$ 50.00

25 - 99 = \$ 100.00

100 + = \$ 200.00

*Number of production workers is defined per CT General Statute 21a-152 as "...the number of persons engaged in the production of bread and pastry products, excluding porters, dishwashers, drivers, sales personnel and other employees not directly engaged in such production."

☐ **Wholesale License to Manufacture Frozen Desserts**
Fee:

\$50.00 for the first 25,000 gallons or fraction thereof, **plus \$0.75** per thousand or fraction thereof in excess of 25,000 gallons

☐ **Vending Machine Operator License**

Fee: (Based on # of Machines)

1 - 3 = \$20.00

4 - 50 = \$50.00

51 - 100 = \$100.00

101 or More = \$100.00 for Each

100 Machines or Fraction Thereof

☐ **Retail License to Manufacture Frozen Desserts**
Fee: \$25.00

☐ **Apple Juice & Cider Manufacturer and Bottler License**
Fee: \$10.00

☐ **Water & Non-Alcoholic Beverage Manufacturer and Bottler License**
Fee: \$75.00

Business Trade Name			
Business Street Address (Location of Business)		City	State
			Zip Code
Tel Number (w/area code)	Federal ID or Soc Sec No.	Previous License Number (if applicable)	
Corporation Name (If Applicable)			
Mailing Address (if different)			
Applicant's Name		Applicant's Title	

BAKERY applicants:		VENDING MACHINE OPERATOR applicants:	WHOLESALE FROZEN DESSERT MANUFACTURER applicants:
NUMBER OF <u>PRODUCTION</u> WORKERS: _____		NUMBER OF MACHINES: _____	NUMBER OF GALLONS: _____
WATER & NON-ALCOHOLIC BEVERAGE MANUFACTURER AND BOTTLER applicants:		APPLE JUICE & CIDER MANUFACTURER AND BOTTLER applicants:	
<input type="checkbox"/> WATER <input type="checkbox"/> BEVERAGE <input type="checkbox"/> BOTH		<input type="checkbox"/> CIDER <input type="checkbox"/> APPLE JUICE <input type="checkbox"/> BOTH	

FOR VENDING MACHINE OPERATOR APPLICANTS ONLY:

ADDRESSES OF LOCATIONS WHERE FOODS, BEVERAGES OR SUPPLIES ARE PREPARED OR STORED	

SUMMARY OF VENDING MACHINES OPERATED, SERVICED OR REPLENISHED			
PRODUCT DISPENSED	NUMBER OF MACHINES OPERATED	BULK	PACKAGED
HOT BEVERAGES			
SOFT DRINKS IN CUPS			
BAKERY PRODUCTS			
DAIRY PRODUCTS			
ICE CREAM			
CANDY, NUTS, GUM			
POTENTIALLY HAZARDOUS FOODS			
OTHER			

MOTOR VEHICLE USED FOR TRANSPORTATION OF FOOD, BEVERAGES OR SUPPLIES			
MAKE	MODEL	YEAR	BODY STYLE

I subscribe and affirm under the penalties of perjury, that the statements made in this application have been examined by me and to the best of my knowledge and belief are true and correct.

Signature of Applicant _____ Date _____

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INSPECTION DATE:		INSPECTED BY:	APPROVED BY:	APPROVAL DATE:
FEE DUE:		FEE COLLECTED:	CHECK OR MONEY ORDER #:	TOWN TAX CODE:
RENEWAL APPLICATION <input type="checkbox"/>	NEW APPLICATION <input type="checkbox"/>	LICENSE YEAR:	EFFECTIVE DATE:	EXPIRATION DATE: